

Documentation Checklist: Process Guideline for Depression
October 10, 2006

Resident: _____

Date: _____

If a concern related to depression is triggered during the survey process, the facility will be given the opportunity to demonstrate that it has followed the steps in this checklist, as evidence to support an appropriate care process related to depression. Evidence of appropriate care process will be considered in determining whether an adverse event (a negative outcome), or the potential for an adverse event, related to the management of depression can be attributed to a deficient facility practice. If attributable to a preventable (avoidable) deficient facility practice, this checklist may also be used in analyzing the severity of the deficiency, if a citation should result.

F-tags, which could be associated with depression concerns, are provided for each of the Tables. Other tags may also be appropriate.

DOCUMENTATION CHECKLIST: PROCESS GUIDELINE FOR DEPRESSION
October 10, 2006

PROCESS INDICATORS	Yes	No	N/A
ASSESSMENT/PROBLEM RECOGNITION May relate to F- 272, 310			
1. Did the staff and physician seek and document risk factors for depression and any history of depression?			
2. Did staff identify residents with signs and symptoms of depression?			
3. Did the staff and physician clarify the nature of signs and symptoms of depression and attempt to differentiate other possible explanations for the symptoms?			
4. Did the staff and physician seek and identify complications of depression?			
DIAGNOSIS/CAUSE IDENTIFICATION May relate to F- 240, 241, 242, 329, 385, 386			
5. Did the staff and physician seek medical and non-medical causes of depression or indicate why causes could not or should not be sought or identified?			
TREATMENT/PROBLEM MANAGEMENT May relate to F- 279, 309, 310, 312			
6. Did the staff and physician address underlying causes of depression?			
7. Did the staff and physician identify and initiate appropriate interventions for treatment of depression?			
8. Were any medications given for depression selected and utilized appropriately?			
MONITORING May relate to F- 279, 280, 385, 429			
9. Did the staff appropriately monitor the progress of the resident's symptoms?			
10. Did the staff and physician evaluate and document the progress of a resident's depression and either modify existing approaches or justify continuing existing ones?			
11. Did the staff and physician monitor and address complications of treating depression?			

 Signature of person completing the form

 Date